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Testimony on

Raised HB 5298, AN ACT INCREASING THE ASSET LIMITATIONS UNDER THE STATE-FUNDED CONNECTICUT HOME CARE PROGRAM FOR THE ELDERLY

Senator Prague, Representative Serra, Senator Gaffey, Representative Bye, Senator Kissel and Representative Frey and distinguished members of the Select Committee on Aging,

My name is Susan Raimondo and I am the Senior Director of Advocacy and Programs for the National Multiple Sclerosis Society, Connecticut Chapter. I am also the family care giver representative to the CT Long Term Care Advisory Council. Thank you for the opportunity to testify today about my concerns about Raised HB 5298, AN ACT INCREASING THE ASSET LIMITATIONS UNDER THE STATE-FUNDED CONNECTICUT HOME CARE PROGRAM FOR THE ELDERLY.

First of all, let me compliment you on your commitment to providing quality programs and services for Connecticut's elders. My concern given the current fiscal crisis is that the funding for state funded programs could be in jeopardy.

The CT General Assembly, Governor Rell and the Department of Social Services have developed and implemented many crucial programs that help to keep older adults and persons with disabilities of all ages in the community. We must keep the existing programs in the budget.

We know that the CT Home Care Program for Elders saves the state \$150 million a year. Before making any changes to this great program, I urge you to support and recommend continued funding for the CT Home Care Program for Disabled Adults.

In 2007, 12 percent of nursing home residents in Connecticut were younger than age 65. The overall goal for Connecticut's long-term care system should be to offer individuals the support services of their choice in the least restrictive setting.

The Connecticut Home Care Program for the Disabled (CHCPD) is a pilot program that was developed to provide home-based services to people age 18–64 with degenerative neurological conditions who are at risk of being institutionalized in nursing homes. Currently, the program is serving 41 individuals throughout the state including those with multiple sclerosis (25), amyotrophic lateral sclerosis (1), Alzheimer's (4), Parkinson's (4), and Huntington's (2). The program has a waiting list. These individuals are not eligible for other programs.

The pilot program, administered by the Connecticut Department of Social Services' Alternate Care Unit, provides services which may include care management, adult day health programs, chore assistance, companions, home health care, home delivered meals, homemaker services, assisted living services and personal care attendants.

Benefits To Families And The Community

- Creates jobs in the health and home care services fields.
- Increases income tax revenue through new jobs.
- Allows family caregivers to maintain their employment, pay taxes and stay afloat financially.
- · Keeps families together.

Cost Savings For The State Of Connecticut

- Connecticut Home Care Program for the Disabled in 2008-2009 COST: \$720,000 of the state budget
- The average monthly cost of home care for individuals on the program is \$1,512, compared to a cost of \$5,690 if the individual were to be on Medicaid and living in a nursing home.
 SAVINGS: \$4,178 per person per month
- Home care for the 41 people on the Connecticut Home Care Program for the Disabled SAVES: \$2,055,576 each year

As the State of Connecticut faces horrific budget challenges, we must keep our existing programs. I am concerned that by increasing the number of participants in the stated funded home care program for elders by increasing asset limits that it could be detrimental the safety of the entire program and also the CT Home Care Program for the Disabled.

Thank you.